Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF INDIANA	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

### Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Amy First name  J Middle name	First name  Middle name	_
	Bring your picture identification to your meeting with the trustee.	Osborne  Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0654		

Case 17-03591-RLM-7A Doc 1 Filed 05/13/17 EOD 05/13/17 11:10:31 Pg 2 of 61

Debtor 1 Amy J Osborne Case number (if known)

	About Debtor 1:	Α	bout Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	☐ I have not used any business name or EINs.  DBA DNA Janitoral of Pershing, Inc.  Business name(s)  EINs	В	I have not used any business name or EINs.
Where you live	2919 W Co Rod 925 N	If	Debtor 2 lives at a different address:
	Number, Street, City, State & ZIP Code	N	lumber, Street, City, State & ZIP Code
	Fayette County	C	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	lf in	Debtor 2's mailing address is different from yours, fill it n here. Note that the court will send any notices to this nailing address.
	Number, P.O. Box, Street, City, State & ZIP Code	N	lumber, P.O. Box, Street, City, State & ZIP Code
Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)		have lived in this district longer than in any other district.
	Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names  Where you live  Why you are choosing this district to file for	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years  Include trade names and doing business as names    I have not used any business name or EINs.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names    DBA DNA Janitoral of Pershing, Inc.

Case 17-03591-RLM-7A Doc 1 Filed 05/13/17 EOD 05/13/17 11:10:31 Pg 3 of 61

Case number (if known)

7.	The chapter of the Bankruptcy Code you are				each, see <i>Notice Required by</i> age 1 and check the appropriate	1 U.S.C. § 342(b) for Individuals Filing for E	Bankruptcy
	choosing to file under	■ Chap	ter 7				
		☐ Chap	ter 11				
		☐ Chap	ter 12				
		☐ Chap	ter 13				
8.	How you will pay the fee	abo	out how yo	ou may pay. Typica attorney is submit	ally, if you are paying the fee yo	with the clerk's office in your local court for urself, you may pay with cash, cashier's che lf, your attorney may pay with a credit card	ck, or money
						n, sign and attach the Application for Individ	luals to Pay
		☐ I re	equest the	at my fee be waiv	Official Form 103A).  ed (You may request this option or fee, and may do so only if you	only if you are filing for Chapter 7. By law, a	a judge may,
		apı	plies to yo	ur family size and	you are unable to pay the fee in	installments). If you choose this option, you al Form 103B) and file it with your petition.	
9.	Have you filed for bankruptcy within the	■ No.					
	last 8 years?	☐ Yes.					
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy cases pending or being	■ No					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	■ No.	Go to	line 12.			
		☐ Yes.	Has yo	our landlord obtain	ed an eviction judgment against	you and do you want to stay in your resider	nce?
				No. Go to line 12			
				Yes. Fill out <i>Initia</i> bankruptcy petition		udgment Against You (Form 101A) and file	it with this

Debtor 1 Amy J Osborne

Case 17-03591-RLM-7A Doc 1 Filed 05/13/17 EOD 05/13/17 11:10:31 Pg 4 of 61

Deb	otor 1 Amy J Osborne				Case number (if known)
Par	t 3: Report About Any Bu	ısinesses	You Owr	n as a Sole Proprie	tor
12.	Are you a sole proprietor			· · · · · · · · · · · · · · · · · · ·	
	of any full- or part-time business?	□ No.	Go to	Part 4.	
		■ Yes.	Name	and location of bus	siness
	A sole proprietorship is a business you operate as		DNA	Janitorial of Per	rshina
	an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any	
	If you have more than one			West CR 925 No on, IN 47357	orth
	sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	te & ZIP Code
	it to this petition.		Chec		ox to describe your business:
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	lefined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	e
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline	s. If you ir ns, cash-f	ndicate that you are ow statement, and f	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am ı	not filing under Chap	pter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	, Hazardo	ous Property or An	y Property That Needs Immediate Attention
	Do you own or have any	■ No.	, riazara	74011000119 01 741	y reporty man recould immediate reconstruction
	property that poses or is alleged to pose a threat				
	of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?	
	public health or safety? Or do you own any				
	property that needs immediate attention?			diate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?	
					Number, Street, City, State & Zip Code

Debtor 1 Amy J Osborne

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 17-03591-RLM-7A Doc 1 Filed 05/13/17 EOD 05/13/17 11:10:31 Pg 6 of 61

Deb	tor 1 Amy J Osborne			Case number	(if known)
Part	6: Answer These Quest	ions for R	eporting Purposes		
16.	What kind of debts do you have?	16a.	Are your debts primarily consuindividual primarily for a personal		ned in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
		16b.		ess debts? Business debts are debts tent or through the operation of the busin	
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you owe t	hat are not consumer debts or business	s debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. G	Go to line 18.	
	Do you estimate that after any exempt property is excluded and	■ Yes.		ou estimate that after any exempt prope ole to distribute to unsecured creditors?	erty is excluded and administrative expenses
	administrative expenses are paid that funds will		■ No		
	be available for distribution to unsecured creditors?		Yes		
18.	How many Creditors do	<b>■</b> 1-49		□ 1,000-5,000	<b>2</b> 5,001-50,000
	you estimate that you owe?	☐ 50-99	)	<b>5</b> 001-10,000	<b>5</b> 0,001-100,000
		☐ 100-1 ☐ 200-9		□ 10,001-25,000	☐ More than100,000
19.	How much do you	□ \$0 - \$	550,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
20.	How much do you	□ \$0 - \$		☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion
Part	7: Sign Below				
For	you	I have ex	camined this petition, and I declare	under penalty of perjury that the inform	nation provided is true and correct.
				m aware that I may proceed, if eligible, available under each chapter, and I che	under Chapter 7, 11,12, or 13 of title 11, oose to proceed under Chapter 7.
				ay or agree to pay someone who is not tice required by 11 U.S.C. § 342(b).	an attorney to help me fill out this
		I request	relief in accordance with the chap	ter of title 11, United States Code, spec	rified in this petition.
		bankrupt and 357	ccy case can result in fines up to \$2 1.	cealing property, or obtaining money or 250,000, or imprisonment for up to 20 ye	r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Amy J	r J Osborne Osborne e of Debtor 1	Signature of Debtor	2
		Executed	May 13, 2017 MM / DD / YYYY	Executed on MM	/ DD / YYYY

Case 17-03591-RLM-7A Doc 1 Filed 05/13/17 EOD 05/13/17 11:10:31 Pg 7 of 61

Debtor 1	Amy J Osborne	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Richard Wayne Greeson Signature of Attorney for Debtor	Date	May 13, 2017 MM / DD / YYYY
Richard Wayne Greeson Printed name		
The Law Offices of Wayne Greeson PC		
501 North Central Avenue Connersville, IN 47331		
Number, Street, City, State & ZIP Code  Contact phone 1 (765) 825-9690	Email address	wgreeson@greesonlaw.com
12644-98 Bar number & State		

### Case 17-03591-RLM-7A Doc 1 Filed 05/13/17 EOD 05/13/17 11:10:31 Pg 8 of 61

					· ·	
Fill	in this infor	rmation to identify your	case:			
Deh	tor 1	Amy J Osborne				
DOD	101 1	First Name	Middle Name	Last Name		
	tor 2	C'ant Name	Middle News	LastName		
(Spot	use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF INDIANA		
Cas	e number					
(if kno	own)				_	if this is an
					amen	ded filing
Off	ficial Fo	orm 106Sum				
Sui	mmary	of Your Assets	and Liabilities an	nd Certain Statistical Information		12/15
Be a	s complete	and accurate as possi	ble. If two married people	are filing together, both are equally responsible for		
				ne information on this form. If you are filing amend to the box at the top of this page.	ed schedu	les after you file
			new Summary and check	the box at the top of this page.		
Part	1: Sumr	marize Your Assets				
					Your a	ssets
					Value o	f what you own
1.	Schedule	A/B: Property (Official F	Form 106A/B)			04 500 00
	1a. Copy li	ne 55, Total real estate,	from Schedule A/B		\$	94,500.00
	1b. Copy li	ne 62, Total personal pro	operty, from Schedule A/B		\$	9,775.72
	4 - 0 1 :-	as CO. Tatal of all assess	tu an Cabadula A/D		Ф.	404.075.70
	1c. Copy III	ne 63, Total of all proper	ty on Schedule A/B		\$	104,275.72
Part	2: Sumr	marize Your Liabilities				
					Your li	abilities
						t you owe
2.	Schedule I	D <sup>.</sup> Creditors Who Have (	Claims Secured by Property	(Official Form 106D)		
				the bottom of the last page of Part 1 of Schedule D	\$	120,996.00
3.	Schedule E	E/F: Creditors Who Have	Unsecured Claims (Officia	I Form 106E/F)		
				s) from line 6e of Schedule E/F	\$	0.00
	3b. Copy t	the total claims from Part	2 (nonpriority unsecured c	laims) from line 6j of Schedule E/F	\$	34,040.00
			( ) ( )	,,		0 1,0 10100
				Your total liabilities	œ.	155,036.00
				Tour total nabilities	Ψ	155,036.00
D(	0		J. E			
Part	3: Sumr	marize Your Income and	u Expenses			
4.		: Your Income (Official F			\$	2,003.25
	Copy your	combined monthly incon	ne from line 12 of Scriedule	· I	Ψ	_,,,,,,
5.		J: Your Expenses (Official			\$	1,570.63
	Copy your	monthly expenses nom	line 220 or Scriedule J		Ψ	,
Part	4: Answ	ver These Questions fo	r Administrative and Stati	stical Records		
6.	Are you fil	ling for bankruptcy und	ler Chapters 7, 11, or 13?			
	□ No. Y	ou have nothing to repor	t on this part of the form. Cl	heck this box and submit this form to the court with yo	ur other sch	nedules.
	■ Yes					
7.		of debt do you have?				
		•				
				debts are those "incurred by an individual primarily for g for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or
		debts are not primarily ourt with your other scheo		ve nothing to report on this part of the form. Check this	s box and s	ubmit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

## Case 17-03591-RLM-7A Doc 1 Filed 05/13/17 EOD 05/13/17 11:10:31 Pg 9 of 61

Debtor 1 Amy J Osborne Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_1,314.25

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total c	laim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

## Case 17-03591-RLM-7A Doc 1 Filed 05/13/17 EOD 05/13/17 11:10:31 Pg 10 of 61

Debte		ation to identify you Amy J Osborne	r case and m	ns ming.			
_	_	First Name	Middle	Name Last Name			
Debto (Spous	or 2 e, if filing)	First Name	Middle	Name Last Name			
Unite	d States Bank	cruptcy Court for the:	SOUTHER	N DISTRICT OF INDIANA			
Case	number						☐ Check if this is an amended filing
<b>~</b> ~ ~ ~		4004/5					
_		<u>m 106A/B</u> : <b>A/B: Pro</b> r	oortv				40/45
				an asset only once. If an asset fits in more than			12/15
	No. Go to Part 2	2.	ole interest in a	ny residence, building, land, or similar property	7		
_	res. Where is t	he property?					
1.1				What is the property? Check all that apply			
1.1	2919 W Co		n .	What is the property? Check all that apply  ■ Single-family home  □ Duplex or multi-unit building  □ Condominium or cooperative	the amoun	it of any secure	aims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property.
1.1	2919 W Co Street address, if a	Rd 925 N available, or other descriptio		Single-family home  Duplex or multi-unit building  Condominium or cooperative	the amoun Creditors I	it of any secure	d claims on Schedule D:
l.1 -	2919 W Co Street address, if a	Rd 925 N available, or other descriptio	357-0000	Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land	Current va	t of any secure Who Have Clair alue of the perty?	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?
1.1	2919 W Co Street address, if a	Rd 925 N available, or other descriptio		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	Current valentire pro	alue of the perty?  94,500.00  the nature of y	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? \$94,500.00  our ownership interest
1.1	2919 W Co Street address, if a	Rd 925 N available, or other descriptio	357-0000	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  Who has an interest in the property? Check or	Current va entire pro	alue of the perty?  94,500.00  the nature of y ee simple, tenste), if known.	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? \$94,500.00  our ownership interest
-	2919 W Co Street address, if a	Rd 925 N available, or other descriptio	357-0000	Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land Investment property  Timeshare  Other	Current va entire pro  Describe (such as f a life estate)	alue of the perty?  94,500.00  the nature of y ee simple, tenste), if known.	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$94,500.00
-	2919 W Co Street address, if a	Rd 925 N available, or other descriptio	357-0000	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  Who has an interest in the property? Check or	Current va entire pro  Describe (such as f a life estat Deeded	alue of the perty?  94,500.00 the nature of y ee simple, tente), if known.  owner	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? \$94,500.00  our ownership interest
-	2919 W Co Street address, if a  Milton City	Rd 925 N available, or other descriptio	357-0000	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  Who has an interest in the property? Check or Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current valentire pro  Describe (such as fa life estate Deeded  Chec (see in	alue of the perty?  94,500.00  the nature of y ee simple, tente), if known.  OWNER	current value of the portion you own? \$94,500.00  Surrownership interest ancy by the entireties, o
-	2919 W Co Street address, if a  Milton City	Rd 925 N available, or other descriptio	357-0000	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  Who has an interest in the property? Check or Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this	Current valentire pro  Describe (such as fa life estate Deeded  Chec (see in	alue of the perty?  94,500.00  the nature of y ee simple, tente), if known.  OWNER	current value of the portion you own? \$94,500.0  our ownership interest ancy by the entireties, common control of the entireties of the entire

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debtor 1	Amy J Osborne		Case number (if known)	
Cars, van	s, trucks, tractors, sport utility	vehicles, motorcycles		
□ No				
Yes				
	Chove		Do not deduct secured of	claims or exemptions. Put
3.1 Make:	Chevy Venture	Who has an interest in the property? Check one	the amount of any secur	red claims on Schedule D:
Model:		Debtor 1 only	Creditors Who Have Cit	aims Secured by Property.
Year:	2004 ximate mileage: 12500	□ Debtor 2 only  □ □ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	nformation:	At least one of the debtors and another	onino proporty :	portion you out
				•
		Check if this is community property (see instructions)	\$2,300.00	\$2,300.00
	Toyoto		Do not deduct secured of	claims or exemptions. Put
3.2 Make:	Toyota Prius	Who has an interest in the property? Check one	the amount of any secur	red claims on Schedule D:
Model:	2007	Debtor 1 only	Creditors Who Have Cla	aims Secured by Property.
Year:	ximate mileage: 9800	□ Debtor 2 only □ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	nformation:	At least one of the debtors and another	chare property :	portion you own:
		☐ Check if this is community property	\$4,287.00	\$4,287.00
		(see instructions)	<u>·</u>	
		own for all of your entries from Part 2, including		\$6,587.00
.pages yo	u nave attached for Part 2. w	ite that number here	>	
art 3: Desc	ribe Your Personal and Househo	ld Itams		
		e interest in any of the following items?		Current value of the
		<b>.</b>		portion you own? Do not deduct secured claims or exemptions.
	d goods and furnishings :: Major appliances, furniture, lin	ens, china, kitchenware		•
□ No				
Yes. D	escribe			
	household g	and		
	nousenoid g	oou		\$1,000,0
	•			\$1,000.0
	: Televisions and radios; audio,	video, stereo, and digital equipment; computers, pri	inters, scanners; music collect	
Examples  No	s: Televisions and radios; audio, including cell phones, camera		inters, scanners; music collect	
, □ No	: Televisions and radios; audio,		inters, scanners; music collect	
Examples  No	e: Televisions and radios; audio, including cell phones, camera describe	s, media players, games	inters, scanners; music collect	\$1,000.00 ions; electronic devices
Examples	s: Televisions and radios; audio, including cell phones, camera	s, media players, games	inters, scanners; music collect	ions; electronic devices

■ No

☐ Yes. Describe.....

Debtor	1 Amy J Osborne		Case nui	mber (if known)	
	oment for sports and hobbies	raina and ather t	ship on the second binaries and tables as Well-to-	okio, oznaca	and knowledge name and the start
Exar ■ N	musical instruments	cise, and other h	obby equipment; bicycles, pool tables, golf clubs	, skis; canoes a	nd kayaks; carpentry tools;
	es. Describe				
_	amples: Pistols, rifles, shotguns, a	ammunition, and	elated equipment		
■ No	o es. Describe				
11. <b>Clo</b> t Exa □ N	amples: Everyday clothes, furs, le	eather coats, desi	gner wear, shoes, accessories		
■ Ye	es. Describe				
	1 adult 1	son			\$100.00
12. <b>Jew</b> <i>Exa</i> <b>■</b> N	amples: Everyday jewelry, costun	ne jewelry, engag	ement rings, wedding rings, heirloom jewelry, wa	atches, gems, go	old, silver
☐ Ye	es. Describe				
_Exa	-farm animals amples: Dogs, cats, birds, horses				
■ No	o es. Describe				
_ `		l items you did r	ot already list, including any health aids you	did not list	
■ No	os. Give specific information				
	ld the dollar value of all of your Part 3. Write that number here		rt 3, including any entries for pages you have	e attached	\$1,500.00
Part 4:	Describe Your Financial Assets				
	own or have any legal or equi	table interest in	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ N	amples: Money you have in your	-	ne, in a safe deposit box, and on hand when you	ı file your petitio	n
Exa	institutions. If you have n		unts; certificates of deposit; shares in credit unio with the same institution, list each.	ns, brokerage h	ouses, and other similar
□ No	o es		Institution name:		
	17.1. <b>C</b>	hecking	US Bank - Business		\$21.00
	17.2. <b>C</b>	hecking	US Bank		\$8.72

Official Form 106A/B Schedule A/B: Property page 3

Case 17-03591-RLM-7A Doc 1 Filed 05/13/17 EOD 05/13/17 11:10:31 Pg 13 of 61

De	ebtor 1	Amy J Osbo	orne		Case number (if known)	
18.	Examp		or publicly traded stocks, investment accounts with b	orokerage firms, money mark	et accounts	
	■ No □ Yes		Institution or issue	er name:		
19.	Non-pu	blicly traded s	tock and interests in incor	porated and unincorporate	d businesses, including an interest in	an LLC, partnership, and
	joint ve ■ No	enture				
	_	Give specific in	formation about them Name of entity:		% of ownership:	
20.	Negotia	able instrument	s include personal checks, c	gotiable and non-negotiable ashiers' checks, promissory r ransfer to someone by signin	notes, and money orders.	
	_	Give specific inf	ormation about them Issuer name:			
21.		nent or pension les: Interests in		403(b), thrift savings accour	ts, or other pension or profit-sharing plan	ns
	☐ Yes. L	_ist each accou	nt separately.  Type of account:	Institution name:		
22.	Your sh		ed deposits you have made :	so that you may continue ser t, public utilities (electric, gas	vice or use from a company , water), telecommunications companies	, or others
	■ No □ Yes			Institution name or i	ndividual:	
23.	Annuitie	es (A contract f	or a periodic payment of mo	ney to you, either for life or fo	r a number of years)	
	☐ Yes	ls	ssuer name and description.			
24.	26 U.S.C		on IRA, in an account in a 529A(b), and 529(b)(1).	qualified ABLE program, o	r under a qualified state tuition progra	am.
	■ No □ Yes	lr	nstitution name and descripti	on. Separately file the record	s of any interests.11 U.S.C. § 521(c):	
25			iture interests in property	Other than anything listed	in line 1), and rights or powers exerci	sable for your benefit
	■ No	•	formation about them	(outor utair arry timing notice	mio 1,, una rigino or ponoro exerci	ouble for your benome
26.				and other intellectual propereds from royalties and licens		
	■ No □ Yes.	Give specific in	formation about them			
27.	Examp		and other general intangik rmits, exclusive licenses, co		s, liquor licenses, professional licenses	
	■ No □ Yes.	Give specific in	formation about them			
M	oney or p	property owed	to you?			Current value of the portion you own?  Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 4

claims or exemptions.

### Case 17-03591-RLM-7A Doc 1 Filed 05/13/17 EOD 05/13/17 11:10:31 Pg 14 of 61 Debtor 1 Amy J Osborne Case number (if known) 28. Tax refunds owed to you □ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 2016 - No refund expected \$0.00 Federal & State 2017 - Undetermined \$0.00 Federal & State 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No

☐ Yes. Describe each claim.......

35. Any financial assets you did not already list

■ No

☐ Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$29.72

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

☐ No. Go to Part 6.

Official Form 106A/B

Yes. Go to line 38.

Current value of the portion you own?

Do not deduct secured

Debtor 1	Amy J Osbor	rne Car	se number (if known)	
				claims or exemptions.
38. <b>Acco</b> i	unts receivable or	commissions you already earned		
□ No				
Yes	. Describe			
		Wash days for Frienius Madical Wash days for Cutting Ed		
		Work done for Frienius Medical, Work done for Cutting Edg Physical Therapy, Work done for Wayne County Tourism E		
		Welcome Center.		\$1,259.00
20 <b>Office</b>	oguinment furni	shings, and supplies		
_Exan	nples: Business-rela	ated computers, software, modems, printers, copiers, fax machines, rug	s, telephones, desks, c	hairs, electronic devices
□ No	. Describe			
■ Yes	. Describe			
		Floor Scrubber, Mops, brooms, mop buckets, push cart		\$400.00
				<u></u>
40. Machi	inery, fixtures, eq	uipment, supplies you use in business, and tools of your trade		
■ No				
⊔ Yes	. Describe			
41. Inven	tory			
■ No	-			
☐ Yes	. Describe			
42 Intere	ets in nartnershin	os or joint ventures		
Tall No	oto in partneromp	s or joint ventures		
☐ Yes	. Give specific info	ormation about them		
		Name of entity: %	of ownership:	
43. <b>Custo</b>	mer lists, mailing	lists, or other compilations		
No.				
☐ Do yo	our lists include pers	sonally identifiable information (as defined in 11 U.S.C. § 101(41A))?		
	■ No			
	☐ Yes. Describe			
44. Any b ■ No	ousiness-related p	property you did not already list		
	. Give specific info	rmation		
45. <b>Add</b>	the dollar value o	of all of your entries from Part 5, including any entries for pages you	ı have attached	
		number here		\$1,659.00
Part 6: D	escribe Anv Farm- a	and Commercial Fishing-Related Property You Own or Have an Interest In.	_	
		nterest in farmland, list it in Part 1.		
46. <b>Do yo</b>	u own or have an	y legal or equitable interest in any farm- or commercial fishing-rela	ted property?	
	o. Go to Part 7.			
☐ Ye	s. Go to line 47.			
Part 7:	Describe All Pro	perty You Own or Have an Interest in That You Did Not List Above		
		r,		

Describe All Property You Own of Have an interest in That You Did Not List Above

Schedule A/B: Property

## Case 17-03591-RLM-7A Doc 1 Filed 05/13/17 EOD 05/13/17 11:10:31 Pg 16 of 61

Dec	Amy J Osborne		Case number (if known)	
53.	Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership			
	No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write that	number here		\$0.00
Part	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$94,500.00
56.	Part 2: Total vehicles, line 5	\$6,587.00		
57.	Part 3: Total personal and household items, line 15	\$1,500.00		
58.	Part 4: Total financial assets, line 36	\$29.72		
59.	Part 5: Total business-related property, line 45	\$1,659.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$9,775.72	Copy personal property total	\$9,775.72
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$104.275.72

Official Form 106A/B Schedule A/B: Property page 7

Debtor 1	Amy J Osborn	e		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B Case number	ankruptcy Court for th	e: SOUTHERN DISTRICT	OF INDIANA	
(if known)				Check if this is an amended filing

6

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	/ the	Property	You	Claim	as	Exempt	

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B	Check only one box for each exemption.	
\$94,500.00	■ \$0.00	Ind. Code § 34-55-10-2(c)(1
	☐ 100% of fair market value, up to any applicable statutory limit	
\$2,300.00	\$2,300.00	Ind. Code § 34-55-10-2(c)(2
	☐ 100% of fair market value, up to any applicable statutory limit	
\$4,287.00	<b>\$4,287.00</b>	Ind. Code § 34-55-10-2(c)(2
	100% of fair market value, up to any applicable statutory limit	
\$1,000.00	\$1,000.00	Ind. Code § 34-55-10-2(c)(2
	☐ 100% of fair market value, up to any applicable statutory limit	
\$400.00	\$400.00	Ind. Code § 34-55-10-2(c)(2
	100% of fair market value, up to any applicable statutory limit	
	\$94,500.00 \$2,300.00 \$4,287.00 \$1,000.00	\$94,500.00  \$94,500.00  \$2,300.00  \$2,300.00  \$100% of fair market value, up to any applicable statutory limit  \$4,287.00  \$100% of fair market value, up to any applicable statutory limit  \$1,000.00

## Case 17-03591-RLM-7A Doc 1 Filed 05/13/17 EOD 05/13/17 11:10:31 Pg 18 of 61

ebtor	1 Amy J Osborne			Case number (if known)	
	ief description of the property and line on hedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che		
	adult 1 son ne from <i>Schedule A/B</i> : 11.1	\$100.00		\$100.00	Ind. Code § 34-55-10-2(c)(2)
	io iioiii Goriedale / v Z. · · · ·			100% of fair market value, up to any applicable statutory limit	
	necking: US Bank - Business	\$21.00	•	\$21.00	Ind. Code § 34-55-10-2(c)(3)
	ic from Generalic AVB. TTT			100% of fair market value, up to any applicable statutory limit	
	necking: US Bank	\$8.72		\$8.72	Ind. Code § 34-55-10-2(c)(3)
LII	le IIIIII Schedule AVD. 17.2			100% of fair market value, up to any applicable statutory limit	
	ork done for Frienius Medical, ork done for Cutting Edge Physical	\$1,259.00		\$370.28	Ind. Code § 34-55-10-2(c)(3)
Th Co Ce	nerapy, Work done for Wayne bunty Tourism Bureau Welcome enter. ne from Schedule A/B: 38.1			100% of fair market value, up to any applicable statutory limit	
	oor Scrubber, Mops, brooms, mop	\$400.00	•	\$400.00	Ind. Code § 34-55-10-2(c)(2)
	ne from Schedule A/B: 39.1			100% of fair market value, up to any applicable statutory limit	
	e you claiming a homestead exemption ubject to adjustment on 4/01/19 and every			iled on or after the date of adjustmer	nt.)
	Yes. Did you acquire the property cover	red by the exemption w	ithin 1	,215 days before you filed this case	?
	□ No □ Yes				
	00				

## Case 17-03591-RLM-7A Doc 1 Filed 05/13/17 EOD 05/13/17 11:10:31 Pg 19 of 61

Fill in this information to identify.					
Fill in this information to identify	your case:				
Debtor 1 Amy J Osbor			_		
First Name	Middle Name Last Nam	ne			
Debtor 2 (Spouse if, filing) First Name	Middle Name Last Nam	ne	-		
United States Bankruptcy Court for	the: SOUTHERN DISTRICT OF INDIANA				
Officed States Bankruptcy Court for	uie. Scottiera district di indiana		-		
Case number					
(if known)				if this is an	
			amend	ded filing	
Official Form 106D					
_	rs Who Have Claims Secu	red by Propert	V	12/15	
Scriedule D. Credito	13 WIIO Have Claims Secu	red by Propert	<u>y</u>	12/13	
	ole. If two married people are filing together, both a Il it out, number the entries, and attach it to this for				
number (if known).		mi on mo top or any additio	na pagoo, mno you na	mo una sass	
1. Do any creditors have claims secure	d by your property?				
☐ No. Check this box and subn	nit this form to the court with your other schedule	es. You have nothing else	to report on this form.		
Yes. Fill in all of the information	ion below.				
Part 1: List All Secured Claims					
	nas more than one secured claim, list the creditor sepa	rately Column A	Column B	Column C	
for each claim. If more than one creditor	has a particular claim, list the other creditors in Part 2	As Amount of claim	Value of collateral	Unsecured	
much as possible, list the claims in alpha	betical order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any	
2.1 Toyota Motor Credit	Describe the property that secures the claim:		\$0.00	\$7,415.00	
Creditor's Name	2012 Toyota Rav 4				
Toyota Financial	- prior surrender				
Services Po Box 8026	As of the date you file, the claim is: Check all the	at			
Cedar Rapids, IA 52408	apply.				
Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated				
rambol, chool, only, challe a zip code	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	☐ An agreement you made (such as mortgage	or secured			
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lie	en)			
At least one of the debtors and anoth					
☐ Check if this claim relates to a community debt	Other (including a right to offset)	obile			
community debt					
Opened					
11/12 Las Active	st				
Date debt was incurred 8/05/15	Last 4 digits of account number M	191			
	<u> </u>				
2.2 Toyota Motor Credit Co	Describe the property that secures the claim:	\$1,224.00	\$0.00	\$1,224.00	
Creditor's Name	2007 Toyota Rav 4				
	- prior surrender				
	As of the date you file, the claim is: Check all the	 at			
	apply.				
Number, Street, City, State & Zip Code	Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only	☐ An agreement you made (such as mortgage	or secured			
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	en)			
☐ At least one of the debtors and anoth	er				

Official Form 106D

# Case 17-03591-RLM-7A Doc 1 Filed 05/13/17 EOD 05/13/17 11:10:31 Pg 20 of 61

Debtor 1 Amy J Ost	oorne		Case	number (if know)		
First Name	Middle N	ame Last Name				
☐ Check if this claim re community debt	lates to a	Other (including a right to offset)	omobile			
Date debt was incurred	Opened 11/10 Last Active 8/20/15	Last 4 digits of account number	0001			
2.3 Us Bank		Describe the property that secures the cla	im.	\$97,679.00	\$94,500.00	\$3,179.00
Creditor's Name		2919 W Co Rd 925 N Milton, IN	·····	φ97,079.00	φ94,300.00	<b>\$3,179.00</b>
		47357 Fayette County				
Po Box 5229		As of the date you file, the claim is: Check apply.	all that			
Cincinnati, OH	45201	Contingent				
Number, Street, City, S	tate & Zip Code	☐ Unliquidated				
Who awas the debt?	h l	Disputed				
Who owes the debt? C	neck one.	Nature of lien. Check all that apply.  ☐ An agreement you made (such as mortgate)	ngo or socured			
■ Debtor 1 only □ Debtor 2 only		car loan)	ige of Secured			
Debtor 1 and Debtor 2	only	☐ Statutory lien (such as tax lien, mechanic	's lien)			
☐ At least one of the deb	•	☐ Judgment lien from a lawsuit	,			
☐ Check if this claim re community debt	lates to a	Other (including a right to offset)	t Mortgage			
	Opened 07/11 Last					
Date debt was incurred	Active 3/28/17	Last 4 digits of account number	6649			
Date debt was incurred  2.4 Us Bank		Last 4 digits of account number  Describe the property that secures the cla		\$14,678.00	\$0.00	\$14,678.00
				\$14,678.00	\$0.00	\$14,678.00
2.4 Us Bank Creditor's Name  Attn: Bankrupt Po Box 5229 Cincinnati, OH  Number, Street, City, S	3/28/17  accy 45201 tate & Zip Code	Describe the property that secures the cla  Credit Line Secured  As of the date you file, the claim is: Check apply.  Contingent Unliquidated Disputed	aim:	\$14,678.00	\$0.00	\$14,678.00
2.4 Us Bank Creditor's Name  Attn: Bankrupt Po Box 5229 Cincinnati, OH  Number, Street, City, S  Who owes the debt? Ci	3/28/17  accy 45201 tate & Zip Code	Describe the property that secures the classification.  Credit Line Secured  As of the date you file, the claim is: Check apply.  Contingent Unliquidated	alm:	\$14,678.00	\$0.00	\$14,678.00
2.4 Us Bank Creditor's Name  Attn: Bankrupt Po Box 5229 Cincinnati, OH  Number, Street, City, S	3/28/17  accy 45201 tate & Zip Code	Describe the property that secures the classification. Credit Line Secured  As of the date you file, the claim is: Check apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.	alm:	\$14,678.00	\$0.00	\$14,678.00
2.4 Us Bank Creditor's Name  Attn: Bankrupt Po Box 5229 Cincinnati, OH Number, Street, City, S  Who owes the debt? Companies of the companies	3/28/17  tcy 45201 tate & Zip Code heck one.	Describe the property that secures the classification.  As of the date you file, the claim is: Check apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgate)	aim:  all that  age or secured	\$14,678.00	\$0.00	\$14,678.00
2.4 Us Bank Creditor's Name  Attn: Bankruph Po Box 5229 Cincinnati, OH  Number, Street, City, S  Who owes the debt? Co Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the deb	3/28/17  45201 tate & Zip Code heck one.  only tors and another	Describe the property that secures the classification.  As of the date you file, the claim is: Check apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgater loan)  Statutory lien (such as tax lien, mechanical Judgment lien from a lawsuit	aim:  all that  age or secured	\$14,678.00	\$0.00	\$14,678.00
2.4 Us Bank Creditor's Name  Attn: Bankruph Po Box 5229 Cincinnati, OH  Number, Street, City, S  Who owes the debt? Co Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2	3/28/17  45201 tate & Zip Code heck one.  only tors and another	Describe the property that secures the classification.  As of the date you file, the claim is: Check apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgater loan)  Statutory lien (such as tax lien, mechanic	aim:  all that  age or secured	\$14,678.00	\$0.00	\$14,678.00
2.4 Us Bank Creditor's Name  Attn: Bankruph Po Box 5229 Cincinnati, OH  Number, Street, City, S  Who owes the debt? Co Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the deb Check if this claim re	3/28/17  45201 tate & Zip Code heck one.  only tors and another	Describe the property that secures the classification.  As of the date you file, the claim is: Check apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgater loan)  Statutory lien (such as tax lien, mechanical Judgment lien from a lawsuit	aim:  all that  age or secured	\$14,678.00	\$0.00	\$14,678.00
2.4 Us Bank Creditor's Name  Attn: Bankrupt Po Box 5229 Cincinnati, OH Number, Street, City, S  Who owes the debt? Ci Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the deb Check if this claim recommunity debt	3/28/17  tcy 45201 tate & Zip Code heck one.  only tors and another lates to a  Opened 08/11 Last Active	Describe the property that secures the claim Credit Line Secured  As of the date you file, the claim is: Check apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgater car loan)  Statutory lien (such as tax lien, mechanical Judgment lien from a lawsuit Other (including a right to offset)	all that age or secured 's lien)	\$14,678.00	\$0.00	\$14,678.00
2.4 Us Bank Creditor's Name  Attn: Bankruph Po Box 5229 Cincinnati, OH  Number, Street, City, S  Who owes the debt? Ci Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the deb Check if this claim re community debt  Date debt was incurred	3/28/17  45201 tate & Zip Code heck one.  only tors and another lates to a  Opened 08/11 Last Active 3/28/17	Describe the property that secures the claim Credit Line Secured  As of the date you file, the claim is: Check apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgater car loan)  Statutory lien (such as tax lien, mechanical Judgment lien from a lawsuit Other (including a right to offset)	aim: all that age or secured 's lien)	\$14,678.00	\$0.00	\$14,678.00

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

## Case 17-03591-RLM-7A Doc 1 Filed 05/13/17 EOD 05/13/17 11:10:31 Pg 21 of 61

Debtor	1 Amy J Osbo	rne		Case number (if know)
	First Name	Middle Name	Last Name	
ı	Name, Number, Stree Alltran Financia PO Box 722929 Houston, TX 772	•		On which line in Part 1 did you enter the creditor?

Odoc	II COOSI IVENI	Doo.	1 11100 00/10	, <u></u> .	-OD 00/10/1	7 11.10.01	9 22 01 01
Fill in this infor	mation to identify your	case:					
Debtor 1	Amy J Osborne						
200101 1	First Name	Middle Na	me La	ast Name			
Debtor 2							
(Spouse if, filing)	First Name	Middle Na	me La	ast Name			
United States Ba	ankruptcy Court for the:	SOUTHERN	DISTRICT OF INDIA	NA			
Case number _			_				
(if known)							Check if this is an
							amended filing
Official Forr	m 106F/F						
	F/F: Creditors W	ho Have	Unsecured Cl	aime			12/15
	d accurate as possible. Us				2 0 flit	:4- NONDRIODITY -I-	
Schedule D: Credit	utory Contracts and Unexp tors Who Have Claims Sec ntinuation Page to this pag mber (if known).	ured by Propert	y. If more space is need	ded, copy	the Part you need, fil	II it out, number the er	tries in the boxes on the
Part 1: List A	III of Your PRIORITY Un	secured Clain	ns				
1. Do any credit	ors have priority unsecure	d claims agains	t you?				
No. Go to F	Part 2.						
☐ Yes.							
Part 2: List A	All of Your NONPRIORIT	Y Unsecured	Claims				
Yes.  4. List all of you unsecured claithan one credi	ave nothing to report in this p or nonpriority unsecured cl im, list the creditor separately tor holds a particular claim, li	aims in the alph y for each claim.	nabetical order of the cre	editor who	holds each claim. It	not list claims already in	cluded in Part 1. If more
Part 2.							Total claim
	ys Bank Delaware ty Creditor's Name		Last 4 digits of account	t number	2383		\$2,887.00
•	•				<b>Opened 06/08</b>	Last Active	
	Vest St		When was the debt incu	urred?	4/01/14		_
	gton, DE 19801 Street City State Zlp Code		As of the date you file,	the claim	s: Check all that anni	v	
	urred the debt? Check one.		As of the date you me,	ine ciann	S. Check all that appl	у	
■ Debto			☐ Contingent				
☐ Debto	,		☐ Unliquidated				
	r 1 and Debtor 2 only		☐ Disputed				
	st one of the debtors and and		Type of NONPRIORITY	unsecure	d claim:		
	k if this claim is for a com	511101	☐ Student loans				
debt	im subject to offset?	-	Obligations arising our	ut of a sepa	ration agreement or c	livorce that you did not	
Is the cla	min subject to onsets		Debts to pension or p	rofit-charin	a nlane, and other sin	nilar dehts	
						illiai uebis	
☐ Yes			Other. Specify Cre	edit Card	<u> </u>		_

Case 17-03591-RLM-7A Doc 1 Filed 05/13/17 EOD 05/13/17 11:10:31 Pg 23 of 61

Debto	Amy J Osborne		Case number (if kn	ow)	
4.2	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	5301		\$2,953.00
	Attn: General Correspondence/Bankruptcy Po Box 30285	When was the debt incurred?	Opened 12/07 4/24/14	Last Active	
	Salt Lake City, UT 84130  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	у	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or d	livorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Card	•	nilar debts	
4.3	Citibank/Best Buy Nonpriority Creditor's Name	Last 4 digits of account number	8751		\$2,178.00
	Centralized Bk/Citicorp Credt Srvs Po Box 790040 St Louis, MO 63179	When was the debt incurred?	Opened 10/13 6/18/16	Last Active	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	у	
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or d	livorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other sin	nilar debts	
	Yes	Other. Specify Charge Acc	count		
4.4	Credit First National Assoc Nonpriority Creditor's Name	Last 4 digits of account number	6366		\$2,369.00
	Attn: BK Credit Operations Po Box 81315 Cleveland, OH 44181	When was the debt incurred?	Opened 12/08 3/30/15	Last Active	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	у	
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:		
	☐ At least one or the debtors and another ☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or d	livorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other sin	nilar debts	
	Yes	■ Other. Specify Charge Acc	count		

Official Form 106 E/F

## Case 17-03591-RLM-7A Doc 1 Filed 05/13/17 EOD 05/13/17 11:10:31 Pg 24 of 61

Debto	Amy J Osborne		Case number (if know)	
4.5	Direct TV  Nonpriority Creditor's Name	Last 4 digits of account number		Unknown
	P.O. Box 5007 Carol Stream, IL 60197	When was the debt incurred?		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify		
4.6	Discover Financial Nonpriority Creditor's Name	Last 4 digits of account number	9727	\$4,222.00
	Po Box 3025 New Albany, OH 43054	When was the debt incurred?	Opened 01/14 Last Active 5/07/14	
	Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Credit Card	d	
4.7	Fayette Memorial Radiologists  Nonpriority Creditor's Name	Last 4 digits of account number		Unknown
	PO Box 1524 Indianapolis, IN 46206	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	$\square$ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify		

## Case 17-03591-RLM-7A Doc 1 Filed 05/13/17 EOD 05/13/17 11:10:31 Pg 25 of 61

Debtor	1 Amy J Osborne	Case number (if know)	
4.8	Fayette Practice Physicians Nonpriority Creditor's Name	Last 4 digits of account number	Unknown
	1941 Virginia Avenue Connersville, IN 47331	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.9	Fayette Regional Health System	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred?	
	1941 Virginia Avenue		
	Connersville, IN 47331	_	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	$\square$ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1	Fayette Salaried Physicians		Unknown
0	Nonpriority Creditor's Name	Last 4 digits of account number	Ulikilowii
	1941 Virginia Ave	When was the debt incurred?	
	Attn: Bankruptcy Connersville, IN 47331		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

Case 17-03591-RLM-7A Doc 1 Filed 05/13/17 EOD 05/13/17 11:10:31 Pg 26 of 61

Debtor	1 Amy J Osborne		Case number (if know)	
4.1	First Bank Richmond Nonpriority Creditor's Name	Last 4 digits of account number	0001	Unknown
	Pob 1145 Richmond, IN 47375	When was the debt incurred?	Opened 02/10 Last Active 8/04/11	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Real Estate	Mortgage	
4.1	Hsbc Bank Usa, Na Nonpriority Creditor's Name	Last 4 digits of account number	0303	Unknown
	Po Box 2013 Buffalo, NY 14240	When was the debt incurred?	Opened 12/19/07 Last Active 10/30/09	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	1	
4.1	Hughes Network Systems Nonpriority Creditor's Name	Last 4 digits of account number		Unknown
	P. O. Box 96874 Chicago, IL 60693-6874	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	, ,	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other Specify		

## Case 17-03591-RLM-7A Doc 1 Filed 05/13/17 EOD 05/13/17 11:10:31 Pg 27 of 61

Debto	Amy J Osborne		Case number (if know)	
4.1	Kohls/Capital One	Last 4 digits of account number	4264	\$918.00
	Nonpriority Creditor's Name Kohls Credit Po Box 3043 Milwaukee, WI 53201	When was the debt incurred?	Opened 10/10 Last Active 3/14/14	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	No	report as priority claims  Debts to pension or profit-sharin	g plans, and other similar debts	
			- '	
	Yes	Other. Specify Charge Acc	count	
4.1 5	Menards/Capital One	Last 4 digits of account number		Unknown
	Nonpriority Creditor's Name Attn: Bankruptcy P.O. Box 15521 Wilmington, DE 19850	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Business a	ccount	
4.1 6	Midland Funding	Last 4 digits of account number	3798	\$1,190.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 939069	When was the debt incurred?	Opened 10/15	
	San Diego, CA 92193  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	По и		
		☐ Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated		
	At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	l claim:	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Student loans	· · · · · · · · · · · · · · · · · · ·	
	debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	·	Company Account Synchrony	

Official Form 106 E/F

Case 17-03591-RLM-7A Doc 1 Filed 05/13/17 EOD 05/13/17 11:10:31 Pg 28 of 61

Debto	r 1 Amy J Osborne		Case number (if know)	
4.1	Moni Smart Security	lack & dimital of account mountain	925N,N473	Unknown
7	Nonpriority Creditor's Name Attn: Customer Service PO Box 814530	Last 4 digits of account number When was the debt incurred?	22314,11473	Olikilowii
	Dallas, TX 75381-4530  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	O continuent		
	Debtor 2 only	☐ Contingent ☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other Specify account		
4.1	PNC	Last 4 digits of account number	1404	Unknown
<u> </u>	Nonpriority Creditor's Name Attn: PNC Customer Service Po Box 53520 Pittoburg BA 45252	When was the debt incurred?	Opened 03/06 Last Active 5/26/08	
	Pittsburg, PA 15253  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Real Estate	Mortgage	
4.1	Reid Health	Last 4 digits of account number		Unknown
<u> </u>	Nonpriority Creditor's Name	_		
	Attn: Patient Accounts 1100 Reid Parkway Richmond, IN 47374	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	■ No □ Yes		g plans, and other similar debts	
	TeS      Te	Other Specify		

Case 17-03591-RLM-7A Doc 1 Filed 05/13/17 EOD 05/13/17 11:10:31 Pg 29 of 61

Debtor	1 Amy J Osborne	Case number (if know)	
4.2			
4.2 0	Reid Health Physician Associates	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred?	
	1100 Reid Parkway Richmond, IN 47374-1157		
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.2	Sherwin Williams	Last 4 digits of account number	Unknown
1	Nonpriority Creditor's Name		
	3516 E Main Street Richmond, IN 47374	When was the debt incurred?	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify account	
		— Other. Specify	
4.2	Sprint	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name		
	Attn: Bankruptcy 6391 Sprint Parkway	When was the debt incurred?	
	Overland Park, KS 66251-4300  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	7.6 of the date year me, the stain is. Oneok air that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Unsecured utility	

Case 17-03591-RLM-7A Doc 1 Filed 05/13/17 EOD 05/13/17 11:10:31 Pg 30 of 61

Debtor	1 Amy J Osborne		Case number (if know)	
4.2	Square One Financial/Cach Llc	Last 4 digits of account number	6104	\$3,696.00
3	Nonpriority Creditor's Name	Last 4 digits of account number		Ψο,οσο.οσ
	Po Box 5980	When was the debt incurred?	Opened 2/18/15	
	Denver, CO 80127	— As of the data was file the alaim i	Charle all that analy	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Cneck all that apply	
	Debtor 1 only	Пол		
		☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	l alaim.	
	At least one of the debtors and another	Student loans	diann.	
	☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	■ Other. Specify 12 Capital (	One National Associat	
4.2				
4	State Farm Ins Support Center  Nonpriority Creditor's Name	Last 4 digits of account number		Unknown
	PO Box 588002	When was the debt incurred?		
	North Metro, GA 30029-8002			
	Number Street City State ZIp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other Specify accident re	• •	
	165	Other. Specify		
4.2 5	Syncb/sam Ash Music	Last 4 digits of account number	5168	Unknown
	Nonpriority Creditor's Name		Opened 2/02/42 Leet Active	
	Po Box 965064 Orlando, FL 32896	When was the debt incurred?	Opened 2/03/12 Last Active 2/02/13	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	□ Yes	Other Specify Charge Acc	count	

Case 17-03591-RLM-7A Doc 1 Filed 05/13/17 EOD 05/13/17 11:10:31 Pg 31 of 61

Debto	or 1 Amy J Osborne		Case number (if know)	
4.2 6	Synchrony Bank/Walmart	Last 4 digits of account number	6517	Unknown
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 956060 Orlando, FL 32896	When was the debt incurred?	Opened 3/22/09 Last Active 4/23/14	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	$\square$ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.2	US Bank	Last 4 digits of account number		\$10,000.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept 5065 Wooster Pike	When was the debt incurred?		
	Cincinnati, OH 45226  Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Business C	redit Card	
4.2				
8	US Bank/Rms CC  Nonpriority Creditor's Name	Last 4 digits of account number	3087	\$2,445.00
	Card Member Services Po Box 108	When was the debt incurred?	Opened 09/11 Last Active 5/07/14	
	St Louis, MO 63166  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other Specify Credit Card		

Official Form 106 E/F

# Case 17-03591-RLM-7A Doc 1 Filed 05/13/17 EOD 05/13/17 11:10:31 Pg 32 of 61

Debtor 1	Amy J Os	sborne		Case r	number (if kr	now)	
9   '	erizon		Last 4 digits of account number	r 0001			\$1,182.00
Ve Ad 50	dministrat 00 Tecnolo	eless Bankruptcy ti gy Dr Ste 500	When was the debt incurred?	Oper 9/30/		Last Active	_
Nu	ımber Street (	rings, MO 63304  City State Zlp Code the debt? Check one.	As of the date you file, the clair	n is: Check	k all that app	ly	
	Debtor 1 onl	v	☐ Contingent				
	Debtor 2 onl	v	☐ Unliquidated				
_		d Debtor 2 only	☐ Disputed				
	At least one	of the debtors and another	Type of NONPRIORITY unsecu	red claim:			
de	bt	s claim is for a community	☐ Student loans☐ Obligations arising out of a se report as priority claims	paration ag	greement or o	divorce that you did not	
	No No		Debts to pension or profit-sha	ring plans,	and other sir	milar debts	
	Yes		Other. Specify				_
Part 3:	List Others	s to Be Notified About a De	bt That You Already Listed				
is trying t have mor	to collect fro re than one c	m you for a debt you owe to se	about your bankruptcy, for a debt tha omeone else, list the original creditor at you listed in Parts 1 or 2, list the ac or submit this page.	in Parts 1	or 2, then li	st the collection agen	cy here. Similarly, if you
Name and A			On which entry in Part 1 or Part 2 did y				
Moore Li		, Leibsker &	Line 4.2 of (Check one):			h Priority Unsecured Cl	
8605 Bro	_			■ Part 2:	Creditors wit	h Nonpriority Unsecure	d Claims
Merrillvil	lle, IN 464	10	Last 4 digits of account number	С	107		
Name and A	Address		On which entry in Part 1 or Part 2 did y	ou list the o	original credit	or?	
		torney at Law	Line 4.6 of (Check one):	Part 1:	Creditors wit	h Priority Unsecured Cl	aims
P. O. Box	x 6200 end, IN 46	660		Part 2:	Creditors wit	h Nonpriority Unsecure	d Claims
ooutii B	511a, 111 40		Last 4 digits of account number	С	562		
Name and A			On which entry in Part 1 or Part 2 did y				
Synchron Attn: Bar			Line <b>4.16</b> of ( <i>Check one</i> ):			h Priority Unsecured Cl	
P.O. Box				■ Part 2:	Creditors wit	h Nonpriority Unsecure	d Claims
Atlanta,	GA 30348	-5972	Last 4 digits of account number				
		mounts for Each Type of U					
	amounts of nsecured cla		ims. This information is for statistica	l reporting	purposes o	only. 28 U.S.C. §159. A	dd the amounts for each
	0-	Domostio support at live to	•	6-	•	Total Claim	
Tota	6a. al	Domestic support obligation	S	6a.	\$	0.0	<u>0</u>
claim	s	Tayon and partole other 1-14	a var. ave the may	Ch	Φ.		
from Part	1 6b. 6c.	Taxes and certain other debt Claims for death or personal	s you owe the government injury while you were intoxicated	6b. 6c.	\$ \$	0.00	
	6d.	•	secured claims. Write that amount here.		\$	0.00	
	6e.	Total Priority. Add lines 6a th	ough 6d	6e.	•	0.0	_
	00.	. Start Strijt / dd iii loo dd ii ii	g., va.		\$	0.00	
						Total Claim	
Tota	6f.	Student loans		6f.	\$	0.0	<u>0</u>
claim	s	Obligations salely a set of a	annuation amount of discourse discourse				
from Part	<b>2</b> 6g.	Obligations arising out of a s you did not report as priority	separation agreement or divorce that claims	6g.	\$	0.0	0

Official Form 106 E/F

Debtor 1 Amy J Osborne

6h. Debts to pension or profit-sharing plans, and other similar debts

 Other. Add all other nonpriority unsecured claims. Write that amount here.

6j. Total Nonpriority. Add lines 6f through 6i.

Case number (if know)

6h. \$ 0.00 6i. \$ 34,040.00

6j. \$ **34,040.00** 

Fill in this infor	mation to identify your	case:		
Debtor 1	Amy J Osborne			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF INDIANA	
Case number				
(if known)				

## Official Form 106G

# Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have th	e contract or lease	State what the contract or lease is for				
2.1									
	Name								
	Number	Street							
	City		State	ZIP Code					
2.2					<u> </u>				
	Name								
	Number	Street							
	City		State	ZIP Code	<u> </u>				
2.3									
	Name								
	Number	Street							
	City		State	ZIP Code	_				
2.4									
	Name								
	Number	Street			_				
	City		State	ZIP Code	_				
2.5	2			2 0000					
	Name				_				
	Number	Street			<u> </u>				
	City		State	ZIP Code	_				

Official Form 106G

## Case 17-03591-RLM-7A Doc 1 Filed 05/13/17 EOD 05/13/17 11:10:31 Pg 35 of 61

Fill in this	s information to identify your	case:					
Debtor 1	Amy J Osborne						
Debier 1	First Name	Middle Name	Last Name				
Debtor 2 (Spouse if, fil	ing) First Name	Middle Name	Last Name				
United Sta	ates Bankruptcy Court for the:	SOUTHERN DISTRICT	OF INDIANA				
Case num (if known)	bber				_	eck if this is an ended filing	
	l Form 106H <mark>Jule H: Your Cod</mark>	ebtors				12/15	
people are ill it out, a our name	s are people or entities who are filing together, both are equal and number the entries in the e and case number (if known).  you have any codebtors? (If y	ally responsible for supp boxes on the left. Attach . Answer every question.	lying correct informatio the Additional Page to	n. If more space is n this page. On the top	eeded, copy t	he Additional Page,	
☐ No							
■ Ye	S						
	thin the last 8 years, have you na, California, Idaho, Louisiana,					ritories include	
■ No	. Go to line 3.						
☐ Ye	s. Did your spouse, former spou	ıse, or legal equivalent live	with you at the time?				
in line Form	lumn 1, list all of your codebte e 2 again as a codebtor only it 106D), Schedule E/F (Official olumn 2.	f that person is a guarant	or or cosigner. Make su	ire you have listed th	ne creditor on	Schedule D (Official	
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The cre Check all schedule		n you owe the debt	
	Ashley Osborne 220 E Main Pershing, IN 47370			■ Schedule D, li □ Schedule E/F, □ Schedule G  Toyota Motor C	, line		

	in this information to identify your contact.								
Dei	otor 1 Amy J Osbo	orne			_				
	otor 2  ouse, if filing)				_				
Uni	ted States Bankruptcy Court for the	: SOUTHERN DISTRIC	CT OF INDIANA		_				
Case number						Check if this	is:		
(If kr	nown)		-			☐ An ame	nded filing		
								ng postpetition following date:	
0	fficial Form 106I					MM / DI	D/ YYYY		
S	chedule I: Your Inc	ome							12/15
atta	use. If you are separated and you ch a separate sheet to this form.  **T1: Describe Employment**								
1.	Fill in your employment information.		Debtor 1			Debt	or 2 or non-f	iling spouse	
	If you have more than one job,	Employment status	■ Employed			☐ Er	☐ Employed		
	attach a separate page with information about additional employers.	Employment status	Owner  DNA Janitorial of Pershing  2919 West CR 925 North Milton, IN 47357			□ No	☐ Not employed		
	employers.	Occupation							
	Include part-time, seasonal, or self-employed work.	Employer's name				<u> </u>			
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed t	here?						
Pai	t 2: Give Details About Mor	nthly Income							
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to r	eport for	any	line, write \$0 in	the space. In	clude your no	n-filing
	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the informatio	n for all e	empl	oyers for that pe	erson on the I	ines below. If	you need
						For Debtor 1		ebtor 2 or ling spouse	
2.		List monthly gross wages, salary, and commissions (be deductions). If not paid monthly, calculate what the monthly			\$	0.0	<u>0</u> \$	N/A	
3.	Estimate and list monthly overt		3.	+\$	0.0	<u> </u>	N/A	-	
4.	Calculate gross Income. Add lin		4.	\$	0.00	\$	N/A		

Deb	tor 1	Amy J Osborne	-	С	Case number (if kr	nown)				
	0	ve Pine A I vene	4		For Debtor 1		noi	r Debtor n-filing s	pouse	
	Cop	by line 4 here	4.		\$	0.00	\$_		N/A	-
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$ (	0.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$	0.00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c.			0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d			0.00	\$_		N/A	_
	5e.	Insurance	5e			0.00	\$_		N/A	_
	5f. 5g.	Domestic support obligations Union dues	5f. 5g		·	0.00	\$_ \$		N/A N/A	_
	5h.	Other deductions. Specify:	5h		·	0.00			N/A N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.			0.00	\$		N/A	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	:		0.00	* \$		N/A	-
8.		all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross	,.			<i></i>	Ψ_		IV/A	-
		receipts, ordinary and necessary business expenses, and the total monthly net income.	8a		\$ 1,314	1 25	\$		N/A	
	8b.	Interest and dividends	8b			0.00	\$-		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce					`_			=
	04	settlement, and property settlement.	8c.			0.00	\$_		N/A	_
	8d. 8e.	Unemployment compensation Social Security	8d 8e			0.00	\$_ \$		N/A N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Food Stamps	s 8f.		\$139	9.00	\$_		N/A	_
	8g.	Pension or retirement income	8g			0.00	\$_		N/A	_
	8h.	Other monthly income. Specify: Land Contract payments	_ 8h _	.+	\$550	0.00	+ \$_		N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,003	3.25	\$_		N/A	A
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	2,003.25	+ \$		N/A	= \$	2,003.25
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			_,,0000	Ľ-			_	_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
11.	I1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0.00									
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certain lies						e. 12.	\$	2,003.25
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?						Combi monthl	ned y income
	_	Yes. Explain: Business income will decrease as I am loosing 1	clea	anir	ng contract					

Official Form 106I Schedule I: Your Income page 2

-#II	in this informa	ition to identify yo	ur caca:								
	tor 1	Amy J Osbor					Cł		if this is:		
	tor 2 ouse, if filing)						A supplement showing postpetition chapter 13 expenses as of the following date:				pter
Unit	ed States Bankr	ruptcy Court for the:	SOUTH	IERN DISTRICT O	F INDIAN	IA.		М	M / DD / YYYY		
	e number nown)										
Of	fficial Fo	rm 106J									
Sc	chedule	J: Your I	Exper	ises							12/15
info	ormation. If m		eded, atta	ch another sheet						or supplying correct your name and case	
		ribe Your House	hold								
1.	Is this a joir										
	■ No. Go to	o line 2. e <b>s Debtor 2 live i</b>	n a senar	ate household?							
	ss. 2 ss										
			t file Offici	al Form 106J-2, <i>E</i>	xpenses f	or Separate House	hold of D	ebtor	r 2.		
2.	Do you have	e dependents?	□ No								
	Do not list Do Debtor 2.	ebtor 1 and	Yes.	Fill out this informat each dependent		Dependent's relati Debtor 1 or Debtor			Dependent's age	Does dependent live with you?	
	Do not state	the								□ No	
	dependents	names.				son			<u>16</u>	■ Yes	
										□ No □ Yes	
										□ No	
										☐ Yes	
										□ No	
2	Da									☐ Yes	
3.	expenses o	penses include f people other the d your depender	nan $_{f \Box}$	No Yes							
Par		ate Your Ongoir			ınlass va	u are using this fo	orm as a	cupr	alament in a Cha	pter 13 case to rep	ort
exp	enses as of a plicable date.	a date after the b	oankruptc	y is filed. If this is	a supple	emental <i>Schedule</i>	J, check	the	box at the top o	f the form and fill i	n the
the	value of sucl	h assistance and		government assistant					Your exp	ansas	
(On	ficial Form 10	юі.)						_	Tour exp		
4.		or home ownersl and any rent for the		-	dence. Ind	clude first mortgage	4.	\$		574.63	
	If not includ	led in line 4:									
	4a. Real e	estate taxes					4a.	\$		0.00	
		rty, homeowner's	, or renter	's insurance			4b.			0.00	
		maintenance, re					4c.	- 1		40.00	
_		owner's associati			-1		4d.			0.00	
5.	Additional r	nortgage payme	ents for yo	<b>our residence</b> , suc	on as hom	ne equity loans	5.	\$		0.00	

Debtor 1 Amy J Osborne	Case number	er (if known)
5. Utilities:		
6a. Electricity, heat, natural gas	6a. S	\$ 100.00
6b. Water, sewer, garbage collection		\$ 0.00
6c. Telephone, cell phone, Internet, satellite, and cable		\$ 0.00
6d. Other. Specify:		\$ 0.00
Food and housekeeping supplies		
Childcare and children's education costs		
Clothing, laundry, and dry cleaning		\$ 40.00
Personal care products and services		50.00
Medical and dental expenses		\$ 220.00
<ul> <li>Transportation. Include gas, maintenance, bus or train fal Do not include car payments.</li> </ul>	re. 12. :	\$ 100.00
<ul> <li>Entertainment, clubs, recreation, newspapers, magazin</li> </ul>		\$ 40.00
Charitable contributions and religious donations		\$ 0.00
	14.	0.00
<ol><li>Insurance.</li><li>Do not include insurance deducted from your pay or includ</li></ol>	ad in lines 4 or 20	
15a. Life insurance	20. 15a.	\$ 0.00
15b. Health insurance	15b.	
15c. Vehicle insurance	15b	
15d. Other insurance. Specify:		0.00
<ol> <li>Taxes. Do not include taxes deducted from your pay or include taxes.</li> </ol>		<b>*</b>
Specify:	16.	0.00
<ul><li>Installment or lease payments:</li><li>17a. Car payments for Vehicle 1</li></ul>	17a.	\$ 0.00
• •		*
17b. Car payments for Vehicle 2	17b.	
17c. Other. Specify:	17c.	
17d. Other. Specify:	17d.	0.00
Your payments of alimony, maintenance, and support		\$ 0.00
deducted from your pay on line 5, Schedule I, Your Inc  Other payments you make to support others who do no	ome (omolar i om i tool).	\$ 0.00
Specify:	19.	0.00
Other real property expenses not included in lines 4 or		ır Income
20a. Mortgages on other property	20a. 5	
	20a	
20b. Real estate taxes		
20c. Property, homeowner's, or renter's insurance	20c.	
20d. Maintenance, repair, and upkeep expenses	20d.	. —————
20e. Homeowner's association or condominium dues	20e.	
. Other: Specify:	21	+\$ 0.00
Calculate your monthly expenses		
22a. Add lines 4 through 21.		\$ 1,570.63
22b. Copy line 22 (monthly expenses for Debtor 2), if any,	from Official Form 106 L 2	\$
		·
22c. Add line 22a and 22b. The result is your monthly exp	enses.	\$ 1,570.63
Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from	Schedule I. 23a.	\$ 2,003.25
23b. Copy your monthly expenses from line 22c above.	23b.	
23b. Copy your monthly expenses from line 220 above.	230.	1,570.63
23c. Subtract your monthly expenses from your monthly i	ncome	
The result is your <i>monthly net income</i> .	23c.	\$ 432.62
The result is your monthly net moonie.		
1. Do you expect an increase or decrease in your expens	es within the vear after you file this	form?
For example, do you expect to finish paying for your car loan within		
modification to the terms of your mortgage?		
■ No.		
T Vos Explain here:		

Fill in th	nis information to identify your	case:			
Debtor '	1 Amy J Osborne				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if,	, filing) First Name	Middle Name	Last Name		
United S	States Bankruptcy Court for the:	SOUTHERN DISTRICT	Γ OF INDIANA		
Case nu	ımber				
(if known)		<del></del>			Check if this is an
					amended filing
Officia	al Form 106Dec				
Dec	laration About a	an Individua	Debtor's Sc	hedules	12/15
	iaration About t	all illaiviaaa	Deptor 3 00	iledaie5	12/13
lf two m	arried people are filing togethe	or both are equally respon	neible for supplying corr	ect information	
	arried people are ming togethe	or, both are equally respe	onoible for supplying con	cot imormation.	
				Making a false statement, cond	
			kruptcy case can result in	n fines up to \$250,000, or impris	sonment for up to 20
years, o	r both. 18 U.S.C. §§ 152, 1341,	1519, and 3571.			
	Sign Below				
	Sign Below				
Dia	d you pay or agree to pay some	one who is NOT an atto	rney to help you fill out b	ankruntey forms?	
Dit	d you pay or agree to pay some	eone who is NOT all allo	They to help you fill out b	ankiupicy forms:	
	No				
П	Yes. Name of person			Attach Bankruptcy Petit	ion Proparar's Notice
Ц	Tes. Name of person			Declaration, and Signat	
				3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	,
	der penalty of perjury, I declare t they are true and correct.	that I have read the sun	nmary and schedules filed	d with this declaration and	
Y	/s/ Amy J Osborne		X		
^	Amy J Osborne		Signature of	Debtor 2	
	Signature of Debtor 1		Oigilatale of		
	- 9				
	Date May 13, 2017		Date		

Fill in	this inform	ation to identify you	r case.			
Debto		Amy J Osborne	- Guooi			
Debio	1 1	First Name	Middle Name	Last Name		
Debto	r 2 if, filing)	First Name	Middle Name	Last Name		
` '						
United	l States Bar	kruptcy Court for the:	SOUTHERN DISTRICT (	OF INDIANA		
	number _					
(if know	n)				_	heck if this is an mended filing
<b>○</b> ŧŧ:,	sial Far	···· 107				
	cial For <b>ement</b>		Affairs for Individ	duals Filing for B	ankruptcv	4/16
inform	ation. If me		attach a separate sheet to		equally responsible for sup y additional pages, write you	
Part 1			rital Status and Where You	Lived Before		
1. W	hat is your	current marital statu	is?			
	Married Not mari	ried				
2. D	uring the la	st 3 years, have you	lived anywhere other than	where you live now?		
	l No					
		all of the places you I	ived in the last 3 years. Do no	ot include where you live now	<i>'</i> .	
C	ebtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
	l <sub>No</sub>					
_		ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
		•	·	,		
Part 2	Explain	n the Sources of You	r Income			
Fi	Il in the tota	I amount of income yo	nployment or from operating u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	l No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
	•	of current year until I for bankruptcy:	☐ Wages, commissions, bonuses, tips	Unknown	☐ Wages, commissions, bonuses, tips	
			Operating a business		☐ Operating a business	

Official Form 107

Case 17-03591-RLM-7A Doc 1 Filed 05/13/17 EOD 05/13/17 11:10:31 Pg 42 of 61

De	Debtor 1 Amy J Osborne			Case number (if known)						
				Debtor 1				Debtor 2		
					of income I that apply.	(befo	s income re deductions and sions)	Sources of inc		Gross income (before deductions and exclusions)
	r last caler anuary 1 to	ndar year: December	31, 2016 )		☐ Wages, commissions, bonuses, tips \$-4,05		\$-4,054.00		nmissions,	
				Opera	ating a business			Operating a	business	
5.	Include in and other winnings.	come regard public bene If you are fil	lless of whet fit payments ng a joint ca	her that income pensions; responsions; responsions; responsible to the second s	rental income; inte have income that	amples o rest; divi you rece	of other income are dends; money coll ived together, list i	e alimony; child supp	royalties; ar ebtor 1.	Security, unemployment, nd gambling and lottery
		Fill in the de	etails.							
				Debtor 1				Debtor 2		
				Sources Describe	of income below.	each (befo	s income from source re deductions and sions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pa	vments You	ı Made Bef	ore You Filed for	Bankrui	otcv			
<b>.</b>	□ No.	Neither Do individual puring the No.	ebtor 1 nor lorimarily for a 90 days bef Go to line List below paid that continuous for the continuous forms of the continuous	Debtor 2 has a personal, to ore you filed 7. each creditor. Do repayments to payments to the payments of the p	family, or househod for bankruptcy, do to whom you panot include paymento an attorney for t	umer de old purpo id you pa id a total nts for do this bank	bts. Consumer de se."  ay any creditor a to of \$6,425* or moromestic support obruptcy case.	otal of \$6,425* or mo e in one or more pa digations, such as c	ore? yments and hild support	01(8) as "incurred by an the total amount you and alimony. Also, do
	■ Yes.				9 and every 3 year ve primarily consu			on or after the date of	of adjustmen	t.
		_	90 days bef	ore you filed	d for bankruptcy, d	id you pa	ay any creditor a to	otal of \$600 or more	?	
		■ No. □ Yes	include pa	each credito	domestic support o			and the total amount upport and alimony.		at creditor. Do not include payments to an
	Creditor	's Name and	d Address		Dates of payme	ent	Total amount paid	Amount you still owe	Was this	payment for
7.	Insiders in of which y a busines alimony.	nclude your r you are an of s you operat	elatives; any ficer, directo e as a sole p	general pa r, person in proprietor. 1	rtners; relatives of control, or owner	any gen of 20% o	ent on a debt you eral partners; part r more of their voti	owed anyone who	ou are a gene ny managing	eral partner; corporations g agent, including one fo
		List all payn  Name and		nsider.	Dates of payme	ent	Total amount	Amount you	Reason f	or this payment
					, ,		paid	still owe		. ,

Del	otor 1 Amy J Osborne		Cas	se number (if known)		
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a de	bt that benefited an
	■ No □ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include credit	this payment tor's name
Pai	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures	•			
9.	Within 1 year before you filed for bankrupte List all such matters, including personal injury modifications, and contract disputes.					
	<ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>					
	Case title Case number	Nature of the case	Court or agency		Status of the case	
	Discover Bank vs Amy J Osborne 21D01-1509-CC-562	Civil	Fayette County Superior Court 401 North Central Avenue Connersville, IN 47331		☐ Pending ☐ On appeal ☐ Concluded	
	Capital One Bank vs Amy J Osborne 21D01-1502-CC-107	Civil	Fayette County Court 401 North Cent Connersville, II	ral Avenue	☐ Pending ☐ On appea ☐ Conclude	
10.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below	cy, was any of your prope ν.	erty repossessed, f	oreclosed, garnis	hed, attached	, seized, or levied?
	■ No. Go to line 11.  ✓ Yes Fill in the information below.					
	☐ Yes. Fill in the information below.  Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happened	i			property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec  No Yes. Fill in the details.		luding a bank or fir	nancial institution	, set off any a	mounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date taken	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a		erty in the possess			fit of creditors, a
	■ No □ Yes					
Pai	t 5: List Certain Gifts and Contributions					
13.	■ No	tcy, did you give any gift	s with a total value	of more than \$60	0 per person?	
	☐ Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person	Describe the gifts			s you gave ifts	Value
	Person to Whom You Gave the Gift and Address:			9		

Case number (if known)

		tion	or contain	No
Value	Dates you contributed	Describe what you contributed	nat total	☐ Yes. Fill in the details for each gift Gifts or contributions to charities the more than \$600 Charity's Name Address (Number, Street, City, State and ZIP
				art 6: List Certain Losses
t, fire, other disaster	thing because of the	r since you filed for bankruptcy, did you lose any	nkruptcy or	<ul> <li>Within 1 year before you filed for ban or gambling?</li> </ul>
				■ No □ Yes. Fill in the details.
Value of property lost	Date of your loss	ribe any insurance coverage for the loss e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	Include	Describe the property you lost and how the loss occurred
			sfers	art 7: List Certain Payments or Trans
Amount of		rs, or credit counseling agencies for services require  Description and value of any property	or prepari	consulted about seeking bankruptcy
payment	or transfer was made	transferred	lot You	Email or website address Person Who Made the Payment, if N
payment \$900.00		Attorney Fees		Email or website address
	made			Email or website address Person Who Made the Payment, if N The Law Offices of Wayne Grees 501 North Central Avenue Connersville, IN 47331
\$900.00	made 3/6/2015	Attorney Fees	son PC	Email or website address Person Who Made the Payment, if N The Law Offices of Wayne Grees 501 North Central Avenue Connersville, IN 47331 wgreeson@greesonlaw.com  CIN Legal Services 4540 Honeywell Court
\$900.00 \$33.00 \$10.00	made 3/6/2015 4/6/2017 03/30/2017	Attorney Fees  Credit Report  Credit counseling  lid you or anyone else acting on your behalf pay or to make payments to your creditors?	g, Inc.	Email or website address Person Who Made the Payment, if N The Law Offices of Wayne Grees 501 North Central Avenue Connersville, IN 47331 wgreeson@greesonlaw.com  CIN Legal Services 4540 Honeywell Court Dayton, OH 45424  Money Sharp Credit Counseling 1916 North Fairfield Avenue Suite 200 Chicago, IL 60647
\$900.00 \$33.00 \$10.00	made 3/6/2015 4/6/2017 03/30/2017	Attorney Fees  Credit Report  Credit counseling  lid you or anyone else acting on your behalf pay or to make payments to your creditors?	g, Inc.	Email or website address Person Who Made the Payment, if N The Law Offices of Wayne Grees 501 North Central Avenue Connersville, IN 47331 wgreeson@greesonlaw.com  CIN Legal Services 4540 Honeywell Court Dayton, OH 45424  Money Sharp Credit Counseling 1916 North Fairfield Avenue Suite 200 Chicago, IL 60647  Within 1 year before you filed for ban promised to help you deal with your

Debtor 1 Amy J Osborne

Debtor 1 Amy J Osborne

Case number (if known)

18.	Within 2 years before you filed for bankrupto transferred in the ordinary course of your build like the property of transfers and transfers and transfers and include gifts and transfers that you have already to the property of the propert	usiness or financial affa de as security (such as t	nirs? he granting of a se		•		
	Person Who Received Transfer Address  Person's relationship to you	Description and v property transferr		Describe any propayments receive paid in exchange	ed or debts	Date transfer was made	
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-produced No Yes. Fill in the details.		y property to a se	elf-settled trust or si	milar device of	which you are a	
	Name of trust	Description and v	alue of the prope	rty transferred		Date Transfer was made	
Par	t 8: List of Certain Financial Accounts, Ins	truments, Safe Deposit	Boxes, and Stora	age Units			
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, assoc No	r other financial accour	nts; certificates of	•			
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	t or Date accor closed, so moved, or transferred	ld,	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 y cash, or other valuables?  No Yes. Fill in the details.	ear before you filed for	bankruptcy, any	safe deposit box or	other deposito	ry for securities,	
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		escribe the content	S	Do you still have it?	
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?						
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, State and ZIP Code)		escribe the content	S	Do you still have it?	
Par	t 9: Identify Property You Hold or Control	for Someone Else					
23.	Do you hold or control any property that sor for someone.  No Yes. Fill in the details.	neone else owns? Inclu	ude any property	you borrowed from,	are storing for	, or hold in trust	
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		escribe the propert	y	Value	
Par	t 10: Give Details About Environmental Info	,					
For	the purpose of Part 10, the following definition	ons apply:					

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy
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page 5

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Debtor 1 Amy J Osborne

Case number (if known)

	regulations controlling the cleanup of the	se substances, wastes, or material.							
	Site means any location, facility, or prope to own, operate, or utilize it, including dis	•	w, whether you now own, operate, o	r utilize it or used					
	Hazardous material means anything an er hazardous material, pollutant, contaminal		waste, hazardous substance, toxic su	ubstance,					
Rep	port all notices, releases, and proceedings	that you know about, regardless of when t	they occurred.						
24.	Has any governmental unit notified you th	nat you may be liable or potentially liable ເ	under or in violation of an environme	ntal law?					
	■ No								
	Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit	of any release of hazardous material?							
	No								
	☐ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.								
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Pai	rt 11: Give Details About Your Business of	or Connections to Any Business							
27.	Within 4 years before you filed for bankru	ptcy, did you own a business or have any	of the following connections to any	business?					
	_	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
	☐ A member of a limited liability con	npany (LLC) or limited liability partnership	(LLP)						
	☐ A partner in a partnership								
	☐ An officer, director, or managing €	executive of a corporation							
	☐ An owner of at least 5% of the vot	ing or equity securities of a corporation							
	☐ No. None of the above applies. Go to	o Part 12.							
	Yes. Check all that apply above and t	fill in the details below for each business.							
	Business Name	Describe the nature of the business	Employer Identification number						
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security n  Dates business existed	umber of ITIN.					
	DNA Janitorial of Pershing 2919 West CR 925 North	Cleaning Service	EIN: 26-4102571						

Milton, IN 47357

**Sandifar Tax Services** 

From-To 6/3/08 to current

Case 17-03591-RLM-7A Doc 1 Filed 05/13/17 EOD 05/13/17 11:10:31 Pg 47 of 61

Debtor 1 Amy J Osborne		Case number (if known)				
i	Nithin 2 years before you filed for bankrupnstitutions, creditors, or other parties.  ■ No □ Yes. Fill in the details below.	otcy, did you give a financial statement to	anyone about your business? Include all financial			
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued				
Part	12: Sign Below					
with a 18 U.S	a bankruptcy case can result in fines up to S.C. §§ 152, 1341, 1519, and 3571. .my J Osborne	\$250,000, or imprisonment for up to 20 y	obtaining money or property by fraud in connection ears, or both.			
,	y J Osborne ature of Debtor 1	Signature of Debtor 2				
Date	May 13, 2017	Date				
Did yo ■ No □ Ye		ent of Financial Affairs for Individuals Fil	ing for Bankruptcy (Official Form 107)?			
Did ye	ou pay or agree to pay someone who is no	ot an attorney to help you fill out bankrupt	ccy forms?			
☐ Ye	s. Name of Person Attach the Bankr	uptcy Petition Preparer's Notice, Declaration	, and Signature (Official Form 119).			

Fill in this info	ormation to identify your	case:		
Debtor 1	Amy J Osborne			
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court for the:	SOUTHERN DIS	TRICT OF INDIANA	
Case number				
(if known)				☐ Check if this is an amended filing
Official F	orm 108			
		n for Indiv	viduals Filing Under Chapte	er 7 12/15
	ndividual filing under cha ave claims secured by yo	-	l out this form if:	
_	ased personal property a	,	ot expired	
You must file t	this form with the court w	ithin 30 days after	you file your bankruptcy petition or by the date se e time for cause. You must also send copies to th	
	people are filing together and date the form.	r in a joint case, bo	oth are equally responsible for supplying correct in	nformation. Both debtors must
	e and accurate as possib		s needed, attach a separate sheet to this form. On	the top of any additional pages,
Part 1: List	Your Creditors Who Have	a Sacurad Claims		
-				
1. For any crec information		art 1 of Schedule D	: Creditors Who Have Claims Secured by Property	/ (Official Form 106D), fill in the
Identify the	creditor and the property t	hat is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
				uo onompron oonouuno o
Creditor's	Toyota Motor Credit			<b>=</b>
name:	Toyota Wiotor Credit		<ul><li>Surrender the property.</li><li>Retain the property and redeem it.</li></ul>	■ No
namo.			☐ Retain the property and enter into a	☐ Yes
Description			Reaffirmation Agreement.	
property securing del	- prior surrender bt:		☐ Retain the property and [explain]:	<u> </u>
Creditor's	Toyota Motor Credit (	Co	Currender the property	■ No
name:			<ul><li>Surrender the property.</li><li>Retain the property and redeem it.</li></ul>	<b>—</b> No
			☐ Retain the property and enter into a	☐ Yes
Description			Reaffirmation Agreement.	
property securing del	- prior surrender bt:		☐ Retain the property and [explain]:	_
Creditor's	Us Bank		☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	

Official Form 108

property

Statement of Intention for Individuals Filing Under Chapter 7

Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

Description of 2919 W Co Rd 925 N Milton, IN

47357 Fayette County

Yes

### Case 17-03591-RLM-7A Doc 1 Filed 05/13/17 EOD 05/13/17 11:10:31 Pg 49 of 61

Debtor 1 Amy J Osborne	Case number (if known)	
securing debt:		_
Creditor's <b>Us Bank</b> name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of <b>Credit Line Secured</b> property	Retain the property and enter into a Reaffirmation Agreement.	■ Yes
securing debt:	☐ Retain the property and [explain]: ————————————————————————————————————	_
n the information below. Do not list real esta	perty Leases nat you listed in Schedule G: Executory Contracts and Unexpire te leases. Unexpired leases are leases that are still in effect; the perty lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2)	e lease period has not yet ended.
Describe your unexpired personal property	leases	Will the lease be assumed?
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Part 3: Sign Below  Under penalty of perjury, I declare that I have property that is subject to an unexpired lease	e indicated my intention about any property of my estate that see	cures a debt and any personal
X /s/ Amy J Osborne	X Signature of Debtor 2	
Amy J Osborne Signature of Debtor 1	Signature of Debtor 2	
Date May 13, 2017	Date	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

(	Chapter 7:	Liquidation	
	\$245	filing fee	_
	\$75	administrative fee	
:	+ \$15	trustee surcharge	
	\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court** Southern District of Indiana

In re	e Amy J Osborne		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR DI	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:				
	For legal services, I have agreed to accept		\$	900.00	
	Prior to the filing of this statement I have received		\$	900.00	
	Balance Due			0.00	
2.	\$335.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	5. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.				
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.				law firm. A
6.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
	<ul><li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;</li><li>b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;</li><li>c. [Other provisions as needed]</li></ul>				
7.	By agreement with the debtor(s), the above-disclosed fee	does not include the following	g service:		
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any bankruptcy proceeding.	agreement or arrangement for	r payment to me for r	epresentation of the	e debtor(s) in
	May 13, 2017	/s/ Richard Wayn	ne Greeson		
_	Date	Richard Wayne C	Greeson 12644-98		
		Signature of Attorne	ey of Wayne Greesoı	n BC	
		501 North Centra			
		Connersville, IN			
1 (765) 825-9690 Fax: 1 (765) 827-0731					
		wgreeson@gree	soniaw.com		
		itume of tum film			

### **United States Bankruptcy Court** Southern District of Indiana

Southern District of Indiana				
In re	Amy J Osborne		Case No.	
		Debtor(s)	Chapter	7
	VERI	IFICATION OF CREDITOR	MATRIX	
The abo	ove-named Debtor hereby verifies t	that the attached list of creditors is true and c	correct to the best	of his/her knowledge.
Date:	May 13, 2017	/s/ Amy J Osborne Amy J Osborne		

Signature of Debtor

INDIANA DEPARTMENT OF REVENUE BANKRUPTCY SECTION MS108 100 NORTH SENATE AVE. RM N240 INDIANAPOLIS, IN 46204

INTERNAL REVENUE SERVICE PO BOX 7346 PHILADELPHIA, PA 19101-7346

ALLTRAN FINANCIAL , LP PO BOX 722929 HOUSTON, TX 77272-2929

ASHLEY OSBORNE 220 E MAIN PERSHING, IN 47370

BARCLAYS BANK DELAWARE 100 S WEST ST WILMINGTON, DE 19801

BLATT, HASENMILLER, LEIBSKER & MOORE LLC 8605 BROADWAY MERRILLVILLE, IN 46410

CAPITAL ONE ATTN: GENERAL CORRESPONDENCE/BANKRUPTCY PO BOX 30285 SALT LAKE CITY, UT 84130 CITIBANK/BEST BUY
CENTRALIZED BK/CITICORP CREDT SRVS
PO BOX 790040
ST LOUIS, MO 63179

CREDIT FIRST NATIONAL ASSOC ATTN: BK CREDIT OPERATIONS PO BOX 81315 CLEVELAND, OH 44181

DIRECT TV P.O. BOX 5007 CAROL STREAM, IL 60197

DISCOVER FINANCIAL PO BOX 3025 NEW ALBANY, OH 43054

FAYETTE MEMORIAL RADIOLOGISTS PO BOX 1524 INDIANAPOLIS, IN 46206

FAYETTE PRACTICE PHYSICIANS 1941 VIRGINIA AVENUE CONNERSVILLE, IN 47331

FAYETTE REGIONAL HEALTH SYSTEM ATTN: BANKRUPTCY
1941 VIRGINIA AVENUE
CONNERSVILLE, IN 47331

FAYETTE SALARIED PHYSICIANS 1941 VIRGINIA AVE ATTN: BANKRUPTCY CONNERSVILLE, IN 47331

FIRST BANK RICHMOND POB 1145 RICHMOND, IN 47375

HSBC BANK USA, NA PO BOX 2013 BUFFALO, NY 14240

HUGHES NETWORK SYSTEMS P. O. BOX 96874 CHICAGO, IL 60693-6874

JOHN D. KRISOR, ATTORNEY AT LAW P. O. BOX 6200 SOUTH BEND, IN 46660

KOHLS/CAPITAL ONE KOHLS CREDIT PO BOX 3043 MILWAUKEE, WI 53201

MENARDS/CAPITAL ONE ATTN: BANKRUPTCY P.O. BOX 15521 WILMINGTON, DE 19850 MIDLAND FUNDING ATTN: BANKRUPTCY PO BOX 939069 SAN DIEGO, CA 92193

MONI SMART SECURITY ATTN: CUSTOMER SERVICE PO BOX 814530 DALLAS, TX 75381-4530

PNC

ATTN: PNC CUSTOMER SERVICE PO BOX 53520 PITTSBURG, PA 15253

REID HEALTH ATTN: PATIENT ACCOUNTS 1100 REID PARKWAY RICHMOND, IN 47374

REID HEALTH PHYSICIAN ASSOCIATES ATTN: BANKRUPTCY 1100 REID PARKWAY RICHMOND, IN 47374-1157

SHERWIN WILLIAMS 3516 E MAIN STREET RICHMOND, IN 47374

SPRINT ATTN: BANKRUPTCY 6391 SPRINT PARKWAY OVERLAND PARK, KS 66251-4300 SQUARE ONE FINANCIAL/CACH LLC PO BOX 5980 DENVER, CO 80127

STATE FARM INS SUPPORT CENTER PO BOX 588002 NORTH METRO, GA 30029-8002

SYNCB/SAM ASH MUSIC PO BOX 965064 ORLANDO, FL 32896

SYNCHRONY BANK ATTN: BANKRUPTCY P.O. BOX 105972 ATLANTA, GA 30348-5972

SYNCHRONY BANK/WALMART ATTN: BANKRUPTCY PO BOX 956060 ORLANDO, FL 32896

TOYOTA MOTOR CREDIT TOYOTA FINANCIAL SERVICES PO BOX 8026 CEDAR RAPIDS, IA 52408

TOYOTA MOTOR CREDIT CO

US BANK PO BOX 5229 CINCINNATI, OH 45201

US BANK ATTN: BANKRUPTCY PO BOX 5229 CINCINNATI, OH 45201

US BANK ATTN: BANKRUPTCY DEPT 5065 WOOSTER PIKE CINCINNATI, OH 45226

US BANK/RMS CC CARD MEMBER SERVICES PO BOX 108 ST LOUIS, MO 63166

VERIZON
VERIZON WIRELESS BANKRUPTCY ADMINISTRATI
500 TECNOLGY DR STE 500
WELDON SPRINGS, MO 63304